UNIVERSITY OF UTAH
HEALTH PLANS

Provider Connection

News & Information for University of Utah Health Plans Provider Partners

It's Time for…

The 2017 Community Education Fairs!

Care Coordination: Tying Healthcare Together

FEATURED TOPICS…

- Credentialing
- Electronic Claims and Clearinghouses
- Medical Documentation
- Medicare Updates
- Mental Health
- Payer Panel
- Productivity and Revenue

…AND MUCH MORE!

Don't miss this **FREE** opportunity to learn from experts in our community.

LOCATIONS

Registration: 8:00 AM
Breakout Sessions: 8:30 AM – 3:30 PM

❖ **Ogden**: Thurs, March 23
  - Eccles Conference Center

❖ **Salt Lake**: Wed, March 29
  - South Towne Expo Center

❖ **Provo**: Thurs, March 30
  - Utah Valley Convention Center

❖ **St. George**: Thurs, April 6
  - Red Lion Hotel

Register and view schedule details https://uhin.org/events
Prize drawing for pre-registrations

Individual & Family Health Insurance Plans

In 2017, University of Utah Health Plans (UUHP) extended coverage to individuals in 16 Utah counties including; Salt Lake, Utah, Weber, Davis, Tooele, Box Elder, Wasatch, Morgan, Summit, Rich, Cache, Uintah, Grand, Iron, Washington and Duchesne counties. At the completion of open enrollment, UUHP has enrolled just over 5000 members.

The Individual & Family plans utilize the Healthy Premier network.

Healthy*Premier*

Healthy U Changes to Home Health with
Coordination of Benefits

Over the last several months, University of Utah Health Plans (UUHP) has met with several home health agencies to better understand how we, as a health plan, may simplify our claims and administrative processes for our Healthy U network partners. As a result of these reviews and discussions, UUHP would like to update you on the following items:

1. Custodial Care: Healthy U Secondary
UUHP has revised our billing policy of requiring EOBs from primary insurance companies for custodial care or "aide" care when the primary insurance is a commercial plan, Medicare and/or Medicare Advantage Plan. Effective as of dates of service October 1, 2016, Healthy U no longer requires a primary payer EOB for custodial care services only (HCPCS S9122, T1001, T1021) when Healthy U is the secondary payer. If other services, such as skilled nursing, are provided, UUHP will require the primary payer EOB.

   Tip: Bill custodial care only claims to Healthy U as a primary claim, and not a secondary claim.

Home health agencies should continue to verify benefits with primary payers prior to billing Healthy U, and bill the primary payer in those unique situations where custodial care is a benefit. UUHP reserves the right to request a coverage letter from the primary payer to confirm custodial care is not a benefit and/or may conduct post-billing audits to ensure the primary payer does not cover custodial care.

UUHP no longer requires medical reviews prior to services for custodial care when Healthy U is secondary.

2. Other Services: Healthy U Secondary
Healthy U no longer requires a primary payer EOB for G0151, G0299 for long-term, ongoing cares (i.e. medication management, lab monitoring, catheters), S9123 (one per cert period). UUHP requires medical reviews prior to services.

3. Skilled Care: Healthy U Secondary
UUHP will require a primary payer EOB for skilled care when Healthy U is the secondary payer. Healthy U secondary claims should be submitted on a HCFA regardless of the primary payer's requirements (UB/HCFA).

UUHP no longer requires medical reviews prior to services for skilled care when Healthy U is secondary.

4. Custodial & Skilled Care: Healthy U Primary
UUHP will continue to require medical reviews prior to services for both custodial care and skilled care when Healthy U is the primary payer.

UNIVERSITY OF UTAH
HEALTH PLANS

Healthy U Changes to Home Health with
Coordination of Benefits

5. U Box Information

UUHP now offers an on-line, HIPAA compliant, secure and efficient method to request prior-authorizations.

a) Complete the UM request form on-line and save under your preferred file name.
http://uhealthplan.utah.edu/for-providers/pdf/um_request_form.pdf

b) Visit http://uuhealthplan.utah.ed/for-providers/box-um.php to access the online submission portal.

c) A "Submit File to UUHP UM" window will appear. Choose (attach) your saved file, add a description and enter your email. Click "upload". You will receive a confirmation message once your file has been sent.

6. Billing Tip

When home health care is approved, the referral (authorization) has a cert period or date range. Claims processing will be greatly expedited if the claim date ranges matches the cert period.

Modifier 22 for Healthy U

Modifier 22 (Unusual procedural services requires manual review).
In order to be considered for increased reimbursement, documentation from the patient's record that will support the significantly greater effort performed must be submitted with the claim. It is not sufficient to simply document the extent of the patient's illness or comorbid conditions that caused additional work. The documentation must describe additional work performed.

If approved, it will be paid at an additional 10% of the established fee schedule. Exception: multiple gestational births.

Disposable Incontinence Products
for Healthy U Members

Disposable incontinence products are covered for disabled members including Disabled Female, Disabled Male, Tech Dependent, and Medically Needy Child.

The following quantity limits apply to any combination of the covered incontinence supply codes for a one-month supply. If the member's need exceeds these limits, referral is required.

• Disabled members on traditional Medicaid programs - 156 per month.
• Members on a HCBS waiver program - 312 per month.

Disposable incontinence supplies are not covered for:
• Normal infant use or for adult incontinence not related to a disability.
• Members residing in a long term care facility, as they are furnished by the facility.

Update to Medicaid Telemedicine Policy
Section I: General Information

Providers must use the GT modifier to indicate that telemedicine was used as the service delivery mechanism.

The GQ modifier is used for transmission of data. This is not a covered service. No additional reimbursement is given to the provider at the originating site for the use of telemedicine. Providers participating in telemedicine must comply with Utah Medicaid provider requirements as specified in the Utah Medicaid Provider Manual, Section I: General Information.

Covered services may be delivered by means of telemedicine, as clinically appropriate. Services include, but are not limited to, consultation services, evaluation and management services, mental health services, and substance use disorder services.

New Medicaid Provider Enrollments and Modifications
Now Online in PRISM

This information is specific to State Medicaid and Healthy U requires providers to be enrolled in State Medicaid.

As of July 1, 2016, providers are able to enroll online and make modifications to their provider record using the Provider Reimbursement Information System for Medicaid (PRISM).

New Enrollments
To submit a new provider enrollment application, go to: https://medicaid.utah.gov/become-medicaid-provider and click New Enrollment Application.

Current Medicaid Providers
As part of the provider enrollment changes, we are asking existing providers to validate their information in PRISM. Each provider's current enrollment record has been converted to PRISM. This conversion will ease the transition between the MMIS and PRISM, allow providers to view historical data, and eliminate the need for providers to complete a new application.

As a Current Medicaid Provider, How Do I Access PRISM for the First Time?
Current Medicaid providers will receive a letter with instructions on how to login to PRISM to validate and modify information. If providers want to receive their validation letter before their scheduled timeframe, they can call Provider Enrollment at (801) 538-6155 or 1-800-662-9651, option 3, wait for the prompt, then option 4. Provider training for PRISM's provider enrollment and validation is available through the Medicaid website at: https://medicaid.utah.gov/pe-training.

Some validation letters have been mailed to providers. The schedule for additional mailings is still being determined.

Can I Still Fax in Documents?
Uploading documents directly into PRISM is the most efficient way to send provider enrollment documents to Medicaid. However, providers will have the option to fax in documents, but must use a Provider Enrollment Cover Sheet. The cover sheet can be found on the Medicaid website at: https://medicaid.utah.gov/utah-medicaid-forms and in PRISM in the View Upload Attachment Step, which is a step utilized when validating provider information, enrolling a new provider, or modifying current provider information. If providers do not use this cover sheet, their documents will not be processed because their documents cannot be properly matched to their provider account. Providers should fill out the cover sheet online and then print a separate cover sheet for each document to ensure that each document is correctly classified within the file.

Do I Need to Submit a Signed Provider User Security Agreement?
Yes. Each new enrollment and each provider validation requires submission of a signed (with a wet signature) provider user security agreement. It is important to review the provider user security agreement carefully so that no required fields are left blank. If a required field is left blank, it will be "returned for edit", which delays the approval process. Keep in mind, the first person to initiate the provider validation in PRISM automatically becomes the Account Administrator.

THANK YOU

We hope you have enjoyed the University of Utah Health Plans Provider Connection Newsletter. We look forward to providing you the most timely and useful content. If you have suggestions or success stories you would like to share, please contact us.

The information contained in this newsletter does not guarantee benefits or change contractual status. If you have questions about benefits or claims, please call Customer Service at 801-587-6480 or toll free 888-271-5870.

WEBSITE AND ELECTRONIC SUPPORT

Please visit our website at uhealthplan.utah.edu/for_providers for additional resources and access to:

- Providers Updates
- Provider Manual
- Provider Newsletters
- University of Utah Health Plans Updates
- Electronic Data Interchange (EDI) Info
   ...And much more

HAVE EDI QUESTIONS?

EDI SUPPORT:

📞 801-587-2638 or 801-587-2639

🖨 801-281-6121

✉ uuhpedi@hsc.utah.edu

Utah Health Information Network (UHIN): 801-466-7705 | uhin.org

Email provider changes to: provider.relations@hsc.utah.edu

PROVIDER CUSTOMER SERVICE NUMBERS

CUSTOMER SERVICE

801-587-6480, Option 1
Toll Free/Out of Salt Lake:
888-271-5870
Fax: 801-281-6121

CLAIMS / ELIGIBILITY

801-587-6480, Option 1

CARE MGMT. UTILIZATION REVIEW

801-587-6480, Option 2
Fax: 801-281-6121

PROVIDER RELATIONS

801-587-2838, Option 2
provider.relations@hsc.utah.edu

EDI SUPPORT

801-587-2638
uuhpedi@hsc.utah.edu

PROVIDER CREDENTIALING

801-587-2838, Option 3
provider.credentialing@hsc.utah.edu

UNIVERSITY OF UTAH
HEALTH PLANS